

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Gopalakrishnan et al.
Serial No. : 10/698,101 Examiner : Tran, Vincent H.
Filed : October 31, 2003 Group Art Unit : 2115
For : RESOURCE CONFIGURATION IN MULTI-MODAL
DISTRIBUTED COMPUTING SYSTEMS

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☐ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR

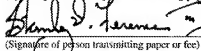
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted by EFS-WEB on March 11, 2008 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person transmitting paper or fee)


(Signature of person transmitting paper or fee)

5. ☐ Also enclosed: _____
6. ☐ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
				RATE	FEF	RATE	FEF
Total Claims Ind.	22	- ** 21	= * 1	x \$25	=	O R x \$50	= 50
Claims	3	- *** 3	= * 0	x \$105	=	O R O x \$210	= 0
<input type="checkbox"/> Multiple Dependent Claim Presented				+ \$185	=	O R + \$370	=
				<u>TOTAL</u>	= \$_____	O R <u>TOTAL</u>	= \$50_____

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$___ to cover the filing fee.
9. ☒ The Commissioner is hereby authorized to charge the \$50 filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

REFERENCE & ASSOCIATES LLC

By Stanley D. Ference III
Stanley D. Ference III
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